

FILED
CLERK U.S. DISTRICT COURT
DISTRICT OF DELAWARE

v. **Civil Docket No. 1:06-cv-00435-GMS**

VERIFIED COMPLAINT DEMAND A JURY TRIAL (seventh amendment)

**UNITED STATES OF AMERICA
(through the federal judicial courts)**

and

**Judge Kent A. Jordan in his official capacity as a Federal Judge
and
in His individual capacity.**

defendants

**PLANTIFF MOTION FOR LEAVE TO PROCEED IN
FORMA PAUPERIS AS PER PLANTIFFS FIRST AMENDMENT TO OUR
UNITED STATES CONSTITUTION THE FEDERAL COURTS ARE A
FEDERAL GOVERNMENT AGENCY UNDER THE CONTROL OF OUR
UNITED STATES CONGRESS
PLANTIFF REQUEST**

That filing fees be waived under a declaration of Oath for lack of funds.

Plaintiff is living on fixed incomes and on social security disability.

and can not afford the filing fee.

Wednesday, August 09, 2006

signed,

**Joseph D'Alessandro
23136 Prince George Drive
Angola Estates
Lewes, Delaware 19958-9342
phone (302)-945-1554**

FILED
U.S. DISTRICT COURT
DISTRICT OF DELAWARE
**UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE**

Joseph L. DiLessa Jr.

Plaintiff

State of Delaware

Defendant(s)

**APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT**

CASE NUMBER:

Joseph J. DiLessa Jr.

declare that I am the (check appropriate box)



Petitioner/Plaintiff/Movant



Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☐ No (If "No" go to Question 2)

If "YES" state the place of your incarceration _____

Inmate Identification Number (Required): _____

Are you employed at the institution? _____ Do you receive any payment from the institution? _____

Attach a ledger sheet from the institution of your incarceration detailing all transactions over the past six months.

2. Are you currently employed? ☐ Yes ☐ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|-----------------------------|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. <u>Disability</u> or workers compensation payments | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received *AND* what you expect you will continue to receive.

AO 240 Reverse (Rev. 10/03)
DELAWARE (Rev 5/06)

4. Do you have any cash or checking or savings accounts?

☒ Yes ☐ No

If "Yes" state the total amount \$ 400.00

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

☒ Yes ☐ No

If "Yes" describe the property and state its value.

IRA. 401k - \$30,000.00
CAR - \$2,000.00

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state NONE if applicable.

I declare under penalty of perjury that the above information is true and correct.

8/23/06 Joseph Z. [Signature]
DATE SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

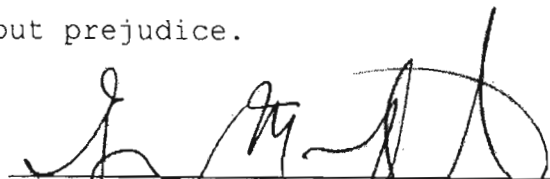
Joseph L. D'Alessandro,)	
Olga D'Alessandro,)	
)	
Plaintiffs,)	
)	
v.)	Civil Action No. 06-435 GMS
)	
State of Delaware,)	
143 rd Delaware General)	
Assembly, and Sheriff of)	
Sussex County,)	
)	
Defendants.)	

ORDER

The plaintiffs, Joseph L. D'Alessandro and Olga D'Alessandro, pro se litigants, have filed this action together with a request that they be permitted to proceed in forma pauperis. The motion (D.I. #3) does not include specific financial information regarding the plaintiffs.

At Wilmington this 27th day of July, 2006,
IT IS ORDERED that:

1. Each plaintiff shall complete and submit an application to proceed without prepayment of fees.
2. Failure to return the requested information within 30 days from the date this order is sent shall result in dismissal of this action without prejudice.


United States District Judge